

Status: Finalized

## I. Center Identification

Organization Name: INDIANA SURGERY CENTER - NORTH

Street Address: 8040 Clearvista Pkwy Suite 150

City: Indianapolis

County: IN

Administrator Name: Natalie Christy

Administrator Email: nchristy@ecommunity.com

ASC Web Address:

Fiscal Year: 2015

Accredited: • Yes • No

Name of Accrediting Body: AAAHC

Deemed Status: O Yes O No

Corporate Tax Status: • For Profit • Non Profit

## II. Identification of Surgical Resources

Number of operating rooms	9	
Number of procedure rooms	9	

## III. Utilization Statistics

A. Total Patients and Procedures			
Time Period	Number of Patients	Number of Procedures	
Persons Served in twelve-month period	11160	17754	
B. Ten Most Frequent Surgical Procedures Perfo CPT Code	rmed	Total Procedures	
11606		705	
30140		701	
69436		469	
15777		458	

58558	449
64493	411
19301	403
64483	378
11603	356
29881	334

## IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following	14
a surgical encounter.	